Despite End of State of Emergency, DHSS Guidance for Visitation at Delaware's Long-Term Care Facilities Will Continue

NEW CASTLE (July 12, 2021) — With the end of the State of Emergency in Delaware on Tuesday, July 13, the Department of Health and Social Services (DHSS) is affirming that Delaware's 86 long-term care facilities (LTCs) will continue to follow the state's existing visitation and testing guidance in order to keep residents healthy and safe during the COVID-19 pandemic.

When the State of Emergency ends, long-term care facilities — including nursing homes and assisted-living facilities — will still operate under Delaware's COVID-19 Updated Reopening Plan in Long-Term Care Facilities. While visitation by loved ones is encouraged, the type of visitation that is allowed depends on each facility's current status in terms of positive cases of COVID-19 among residents, the county's overall COVID-19 positivity rate and the percentage of residents who are vaccinated. Visitors are encouraged to check with their loved one's facility on the current visitation status before they arrive.

Delaware's LTC reopening guidance is in alignment with visitation and testing requirements from the Centers for Medicare & Medicaid Services (CMS) and the Centers for Disease Control and Prevention (CDC), both of which came in response to reductions in COVID-19 infections and transmission and increased vaccination rates in the LTC population. Consistent with CDC and CMS recommendations, Delaware's guidance for

visitors includes active screening for COVID-19 regardless of vaccination status, the use of face coverings or masks by unvaccinated visitors and by all in each facility's common areas, social distancing, frequent handwashing or the use of hand sanitizer, and the signing of a visitor's log among other core principles.

"Our highest priority is to ensure that residents of nursing homes and assisted-living facilities continue to be as safe as possible," DHSS Secretary Molly Magarik. "While we are grateful for the reduction in COVID-19 cases and hospitalizations among the residents of these long-term facilities and for the high rates of vaccination among residents, our staff from the Division of Health Care Quality and the Division of Public Health will continue to work with the leadership of long-term care facilities to make sure that they have strong screening, infection and isolation measures in place. In partnership with the long-term care facilities, we will do everything we can to continue to facilitate indoor visitation for residents and their family members or close friends, but that will depend on each facility's status."

Highlights of the guidance include:

Indoor visitation

- •LTC facilities should allow and support indoor visitation for all residents regardless of vaccination status, with certain exceptions when visitation should be limited for the following residents because of a high risk of COVID-19 transmission:
 - Unvaccinated residents, if the county positivity rate where the facility is located is greater than 10 percent and fewer than 70 percent of residents in the facility are fully vaccinated;
 - Residents with confirmed COVID-19 infection,
 whether vaccinated or unvaccinated, until they

have met the criteria to discontinue transmissionbased precautions;

- Residents in quarantine, whether vaccinated or unvaccinated, until they have met criteria for release from quarantine.
- LTC facilities should consider how the number of visitors per resident at one time and the total number of visitors in the facility at one time (based on the size of the building and physical space) will affect the ability to maintain the core principles of infection prevention consistent with CDC guidance. If necessary, facilities should consider scheduling visits for a specified length of time to help ensure all residents are able to receive visitors.
- Visitors should go directly to the resident's room or designated visitation area, and visitor movement in the LTC facility should be limited.
- Visits for residents who share a room should not be conducted in the resident's room, if possible. For situations where there is a roommate and the health status of the resident prevents leaving the room, facilities should attempt to enable in-room visitation while adhering to the core principles of COVID-19 infection prevention.
- If a resident and their visitor are fully vaccinated, they can choose to have close contact (including touch) with the visitor without a face mask. Regardless, visitors must physically distance from other residents and staff in the facility.

Outdoor visitation

- Outdoor visits are preferred even when the resident and visitor are fully vaccinated against COVID-19. Visits should be held outdoors whenever practicable.
- Aside from weather considerations or an individual's health status, outdoor visitation should be routinely

facilitated.

• LTC facilities should have a process to limit the number and size of visits simultaneously to support safe infection prevention practices.

Required visitation

- An LTC facility may not restrict visitation without a reasonable clinical or safety cause, consistent with federal and state regulations regarding rates of COVID-19 positivity in the county and the facility, and the rate of immunization among residents.
- Residents who are on transmission-based precautions for COVID-19 should only receive visits that are virtual, through windows, or in-person for compassionate care situations, with adherence to transmission-based precautions.

Compassionate care visits

- Compassionate care visits should be allowed at all times regardless of a resident's vaccination status, the county's positivity rate, or an outbreak.
- The term "compassionate care visit" does not exclusively refer to end-of-life situations. Examples of other types of compassionate care situations include, but are not limited to:
 - A resident, who was living with their family before recently being admitted to a LTC facility, is struggling with the change in environment and lack of physical family support.
 - A resident who is grieving after a friend or family member recently passed away.
 - A resident who needs cueing and encouragement with eating or drinking, previously provided by family and/or caregiver(s), is experiencing weight loss or dehydration.
 - A resident, who used to talk and interact with

others, is experiencing emotional distress, seldom speaking, or crying more frequently (when the resident had rarely cried in the past).

- In addition to family members, compassionate care visits can be conducted by any individual that can meet the resident's needs, such as clergy or lay persons offering religious and spiritual support.
- Compassionate care visits should be conducted using social distancing; however, if a visitor and facility identify a way to allow for personal contact, it should only be done following all appropriate infection prevention guidelines, and for a limited amount of time.
- Fully vaccinated residents and visitors can choose to have close contact (including touch) with their visitor without a face mask.
- Visitors must physically distance from other residents and staff.
- LTC facilities should work with residents, families, resident representatives, and the state's Long-Term Care Ombudsman program through a person-centered approach, to identify the need for compassionate care visits.

Visitor testing and vaccinations

- Visitors should not be required to be tested or vaccinated (or show proof of such) as a condition of visitation.
- Although not required, facilities in medium- or highpositivity counties are encouraged to offer testing to visitors, if feasible.
- Facilities may encourage visitors to be tested on their own prior to coming to the facility (e.g., within 2-3 days).

The plan also includes sections on communal dining and activities and on indoor visitations during a COVID-19 outbreak. The state defines an outbreak as a single new COVID-19 infection in a facility staff member or any LTC

facility onset COVID-19 infection in a resident. A resident admitted to the facility with COVID-19 does not constitute a facility outbreak.

If members of the public find that visitation is not occurring as per the guidance, complaints can be filed with the Division of Health Care Quality:

Phone: 1-877-453-0012Fax: 1-877-264-8516

•Online:

https://dhss.delaware.gov/dhss/dhcq/mailform.html

If residents of long-term care facilities or their loved ones have concerns about their care, treatment or living conditions, they can call DHSS' Long-Term Care Ombudsman program at 1-800-223-9074.